

**HAWAII STATE ETHICS COMMISSION**  
**Candidates For State Offices: Disclosure Form Instructions**

**QUESTIONS?** If you have any questions regarding the following instructions, contact the Hawaii State Ethics Commission for assistance.

**WHO MUST FILE?** Article XIV of the State Constitution and sections 84-17(b), (c)(10), and (d)(1), Hawaii Revised Statutes, require any person who files nomination papers for election to state office to file a public financial disclosure statement with the State Ethics Commission.

**WHEN MUST A FINANCIAL DISCLOSURE FORM BE FILED?** The financial disclosure form must be **received** (not just postmarked) by the State Ethics Commission **by Tuesday, September 5, 2006**. Candidates for the Office of Hawaiian Affairs must file their financial disclosure forms **by Tuesday, October 17, 2005**.

**WHAT TIME PERIOD DOES THE FORM COVER? WHAT DOES THE TERM "DISCLOSURE PERIOD" MEAN?** The "disclosure period" is the period of time for which you must disclose all pertinent information. For **Item 1 only** (income for services rendered) on the financial disclosure form, the period of time covered is the preceding calendar year, which is January 1, 2005 to December 31, 2005. For **Items 2 through 10**, the disclosure period is the period of time covering January 1, 2005 to the date of filing. All information required to be disclosed must be disclosed if the items existed, arose, or occurred during the disclosure period, even if they do not exist at the time of filing. If further clarification is needed, please contact the Hawaii State Ethics Commission.

**WHERE MUST THE FINANCIAL DISCLOSURE FORM BE FILED?** The financial disclosure form must be filed with the Hawaii State Ethics Commission, 1001 Bishop Street, American Savings Bank Tower, Suite 970, Honolulu, Hawaii or mailed to the Hawaii State Ethics Commission, P.O. Box 616, Honolulu, Hawaii 96809.

**Note:** Neighbor island candidates for state offices may obtain the disclosure forms from the offices of the County Clerks. However, the disclosure forms for candidates for state offices must only be filed with the Hawaii State Ethics Commission. Filing the forms with the offices of the County Clerks does **not** constitute filing with the Hawaii State Ethics Commission.

**WHAT INTERESTS MUST BE DISCLOSED?** HRS §84-17(f) lists those interests that must be disclosed. These include the source and amount of income of \$1,000 or more received during the preceding calendar year for services rendered; ownership or beneficial interests in a business having a value of \$5,000 or more or equal to ten percent of the ownership of the business; fiduciary relationships held in a business; the names of creditors to whom the value of \$3,000 or more was owed; real property, other than the personal residence(s) of the candidate, in which an interest is held, acquired, or transferred whose value is \$10,000 or more; creditor interests, having a value of \$5,000 or more, in an insolvent business; and clients represented before state agencies. **Candidates must only disclose their own financial interests, and not the financial interests of their spouses or dependent children.**

**IMPORTANT: PENALTIES FOR FAILURE TO FILE OR FILING LATE** HRS §84-17(j) requires the State Ethics Commission to make **public** the names of candidates who do not file their disclosure statements on time and to assess a late filing penalty of \$25 against those candidates. To avoid a late filing, candidates who mail their forms should allow sufficient time for their forms to reach the State Ethics Commission before the filing deadline date. Because of the limited time between the filing deadline date and the date of the election, **no extensions can be granted**. HRS §84-17(j) also authorizes the State Ethics Commission to investigate charges and to issue public decisions as to whether a candidate has complied with the disclosure requirements.

**Sample Form Attached**

## **DEFINITIONS**

The following definitions, set forth in HRS §84-3, must be adhered to as you complete the form:

"Business" includes a corporation, partnership, a sole proprietorship, a trust or foundation, or any other individual or organization carrying on a business, whether or not operated for profit.

"Compensation" means any money, thing of value, or economic benefit conferred on or received by any person in return for services rendered or to be rendered by oneself or another.

"Employment" means any rendering of services for compensation.

"Financial interest" means an interest held by a candidate, which is:

1. An ownership interest in a business.
2. A creditor interest in an insolvent business.
3. An employment, or prospective employment for which negotiations have begun.
4. An ownership interest in real or personal property.
5. A loan or other debtor interest
6. A directorship or officership in a business.

"State agency" includes the State, the legislature and its committees, all executive departments, boards, commissions, committees, bureaus, offices, the University of Hawaii, and all independent commissions and other establishments of the state government but excluding the courts.

## **GENERAL INSTRUCTIONS**

Step 1: Complete the first page by providing your name, your residence and mailing address, your telephone number (residential and business), and the name of the office to which you seek election. The information on the first page is for office use only.

Step 2: Complete the heading on the second page and complete items 1 through 10 of the financial disclosure form (see the item-by-item instructions on the next page). ***If you have no reportable interests in any item, check the appropriate space on the form.*** If more space is needed to answer any item, attach an additional sheet and check the space under the appropriate item number. Please refer by number to the item or items that are being completed on additional sheets.

Step 3: Sign the ***certification*** at the bottom of the form and fill in the date on which you signed the form. The filing is not valid without an original signature.

Step 4: Make sure you retain a copy for your records.

Step 5: File your completed form with the Hawaii State Ethics Commission.

**Remember:** You must only disclose your own financial interests, and not the financial interests of your spouse or dependent children.

## **ITEM BY ITEM INSTRUCTIONS**

These instructions explain the information required by each of the specific items noted in the form. Where an item calls for the stating of a dollar amount, you may indicate the value of the interest by using the appropriate letter from the following code:

### **Financial Amount Code**

|   |  |
|---|--|
| A | Less than \$1,000                            |
| B | At least \$1,000 but less than \$10,000      |
| C | At least \$10,000 but less than \$25,000     |
| D | At least \$25,000 but less than \$50,000     |
| E | At least \$50,000 but less than \$100,000    |
| F | At least \$100,000 but less than \$150,000   |
| G | At least \$150,000 but less than \$250,000   |
| H | At least \$250,000 but less than \$500,000   |
| I | At least \$500,000 but less than \$750,000   |
| J | At least \$750,000 but less than \$1,000,000 |
| K | At least \$1,000,000 or more                 |

For example, for Item 1 of the disclosure form, if your income from an employment source is \$45,000 per year, you may indicate your compensation by using the letter "D" from the financial amount code instead of stating the exact dollar amount of your income.

**Item 1. Income For Services Rendered For Preceding Calendar Year:** You must report the source and amount of all income of \$1,000 or more, for services rendered, received **during the preceding calendar year. The preceding calendar year covers the period January 1, 2005 to December 31, 2005.** The term "source" includes any state or other government agency. You must report the name of the source of the income, the amount of income received, and the nature of the services provided. For example, if you are employed by a business, then report the name of the business, the amount of income received during the preceding calendar year, and the nature of the services you provided to the business. When disclosing the source, provide the complete name (not acronyms), and the address of the business or source from which the income was derived.

**Item 2. Ownership or Beneficial Interests in Businesses:** You must report the amount and identity of every ownership or beneficial interest held by you **during the disclosure period** in any business in or outside of the State where that interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business. **The disclosure period covers January 1, 2005 to the date of filing.** Report the complete name (not acronyms) and address of the business, the kind of activity the business is engaged in, and the nature of your interest in the business. If you are a shareholder, you must report the number of shares owned or the approximate value of the stock.

Note: You need not report interests in the form of an account in a federal or state-regulated financial institution, mutual insurance policies, or individual items in a mutual fund or blind trust if the mutual fund or blind trust has been otherwise disclosed under this item.

Retirement Accounts: You need not report retirement accounts such as 401(K)s and IRAs.

**Item 3. Transfer of Ownership or Beneficial Interest in Businesses:** If an ownership or beneficial interest reported in Item 2 was transferred **during the disclosure period** (January 1, 2005 to the date of filing), indicate the date of the transfer.

**Item 4. Creditors:** You must report the name of each creditor to whom you owed \$3,000 or more was owed by you **during the disclosure period** (January 1, 2005 to the date of filing). You are required to report the original amount owed and the present amount owed. Accounts of a business entity payable in the ordinary course of business need not be reported. Debts arising out of retail installment transactions for the purchase of consumer goods also need not be reported.

**Item 5. Officerships, Directorships, Trusteeships:** You are required to disclose every officership, directorship, trusteeship, or other fiduciary relationship held by you **during the disclosure period** (January 1, 2005 to the date of filing) in a business, including corporations, associations, unions, partnerships, trusts or foundations, and nonprofit businesses and associations. You must also indicate the annual compensation received, if any, and the term of office.

**Item 6. Interests in Real Property Held:** You are required to disclose the street address and the tax map key number (if a tax map key number exists) of any real property in or outside of the State, if the interest has a value of \$10,000 or more and was held by you **during the disclosure period** (January 1, 2005 to the date of filing). The value of the real property interest may be computed in any reasonable manner. You may, for example, compute the value from the property's assessed valuation. You are not required to disclose real property held that is your personal residence.

**Item 7. Interests in Real Property Acquired:** You are required to disclose any interest in real property in or outside of the State, if the interest has a value of \$10,000 or more and was acquired by you **during the disclosure period** (January 1, 2005 to the date of filing). You must report the amount that was paid for the property and the nature of the consideration paid, i.e., whether the payment was in cash, exchange, agreement of sale, etc. You must also provide the name of the person from whom the property was acquired (the person receiving the consideration). In addition, you must report the street address and the tax map key number (if a tax map key number exists) of the real property in which the interest was acquired. You are not required to disclose real property acquired that is your personal residence.

**Item 8. Interests in Real Property Transferred:** For this item, the method of reporting is the same as that indicated for Item 7. Here, however, you must report any interest in real property in or outside of the State, if the interest has a value of \$10,000 or more and was transferred by you **during the disclosure period** (January 1, 2005 to the date of filing). You must report the amount received; the nature of the consideration (cash, exchange, agreement of sale, etc.); and the street address and the tax map key number (if a tax map key number exists) of the real property. You must also provide the name of the person to whom the real property was transferred (the person furnishing the consideration). You are not required to disclose real property transferred that was your personal residence.

**Item 9. Clients Personally Represented Before State Agencies:** You are required to report the name of any client you personally represented before state agencies for a fee or compensation **during the disclosure period** (January 1, 2005 to the date of filing). You must also report the names of the particular state agencies involved. For example, if you represented a client before a particular state board, then report the name of that board. If the representation involved ministerial matters or involved representation of a person in your state capacity where you received no additional compensation (aside from your state salary), the representation need not be disclosed. You need not report clients personally represented before the courts.

**Item 10. Creditor Interests in Insolvent Businesses:** You are required to report the amount and identity of every creditor interest in an insolvent business held by you **during the disclosure period** (January 1, 2005 to the date of filing). Only interests having a value of \$5,000 or more need to be disclosed. An insolvent business is one that is unable to pay debts as they become due. Disclose the name and address of the business, the nature of the business, the nature of the interest held, and the value of the interest held.

**IMPORTANT:** You must sign and date your disclosure form.



# HAWAII STATE ETHICS COMMISSION CANDIDATES' DISCLOSURE OF FINANCIAL INTERESTS

(To be filed by candidates for state elective office)

**NOTE: Information On This Page Is For Office Use Only**

|   |   |  |
|---|---|--|
| <b>HAWAII STATE ETHICS COMMISSION</b><br>1001 Bishop Street, ASB Tower Suite 970<br>Honolulu, Hawaii 96813<br>(P.O. Box 616, Honolulu, Hawaii 96809)<br>Telephone: (808) 587-0460<br>Fax: (808) 587-0470<br>Email: <a href="mailto:ethics@hawaiiethics.org">ethics@hawaiiethics.org</a><br>Web site: <a href="http://www.hawaii.gov/ethics">www.hawaii.gov/ethics</a> |   | For Office Use Only<br>DATE REC'D: FILE NO.: |
| <b>IMPORTANT: Please read instructions carefully before filling out this form.</b>  |   |  |
| FULL NAME (Last, First, Middle)<br><br><i>Public, John Quincy</i>   |   |  |
| RESIDENCE ADDRESS<br><br><i>0000 Kamehameha Highway<br/>Haleiwa, HI 96700</i>   |   |  |
| MAILING ADDRESS<br><br><i>Same as Above</i>   |   |  |
| BUSINESS TELEPHONE<br><br><i>(808) 999-0000</i>   | OFFICE TO WHICH YOU SEEK ELECTION:<br><br><i>Governor</i> |  |
| RESIDENCE TELEPHONE<br><br><i>(808) 123-0000</i>  |   |  |

**Sample Form**

# HAWAII STATE ETHICS COMMISSION CANDIDATES' DISCLOSURE OF FINANCIAL INTERESTS

|  |   |
|--|---|
| <b>NAME (Last, First, Middle)</b><br><br><p style="text-align: center;"><i>Public, John Quincy</i></p> | <b>OFFICE TO WHICH YOU SEEK ELECTION:</b><br><br><p style="text-align: center;"><i>Governor</i></p> |
|--|---|

## ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more received **during the preceding calendar year** (1/1/05 to 12/31/05), for services rendered, and the nature of the services rendered.

| NAME AND ADDRESS OF SOURCE OF INCOME                                     | AMOUNT   | SERVICES RENDERED |
|--|----------|-------------------|
| <i>Dental Work, Inc.<br/>000 Beretania Street<br/>Honolulu, HI 96800</i> | <i>D</i> | <i>Dentistry</i>  |
| <i>The Health Consortium<br/>0000 Dole Street<br/>Honolulu, HI 96800</i> | <i>A</i> | <i>Consultant</i> |

[ ] Check here if entry is None
[ ] Check here if additional sheets are attached

## ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held **during the disclosure period** (1/1/05 to date of filing) in any business in or outside of the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

| BUSINESS NAME AND ADDRESS   | NATURE OF BUSINESS            | NATURE OF INTEREST     | VALUE OR NO. OF SHARES |
|---|-------------------------------|------------------------|------------------------|
| <i>Dental Work, Inc.<br/>000 Beretania Street<br/>Honolulu, HI 96800</i>        | <i>Dental Practice</i>        | <i>Stock</i>           | <i>E</i>               |
| <i>Lili's Puppet Supply<br/>000 Haleiwa Road<br/>Haleiwa, HI 96700</i>          | <i>Retail Puppet Supplies</i> | <i>Joint Ownership</i> | <i>C</i>               |
| <i>Computer Challenge Company<br/>0000 Cyber Avenue<br/>Cupertino, CA 99900</i> | <i>Computer Game Design</i>   | <i>Stock</i>           | <i>1,000 Shares</i>    |

[ ] Check here if entry is None
[ ] Check here if additional sheets are attached

**ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES**

List any ownership or beneficial interests in businesses transferred **during the disclosure period** (1/1/05 to date of filing) and the date of transfer.

| OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD   | DATE OF TRANSFER  |
|--|-------------------|
| <i>Transferred 500 Shares of Stock in<br/>Computer Challenge Company<br/>0000 Cyber Avenue<br/>Cupertino, CA 99900</i>     | <i>06/15/2006</i> |
| <input type="checkbox"/> Check here if entry is None <input type="checkbox"/> Check here if additional sheets are attached |                   |

**ITEM 4: CREDITORS**

List the name of each creditor to whom the value of \$3,000 or more was owed **during the disclosure period** (1/1/05 to date of filing) and the original amount and amount outstanding. Exclude debts from retail installment transactions for the purchase of consumer goods.

| NAME OF CREDITOR   | ORIGINAL AMOUNT OWED | AMOUNT OUTSTANDING |
|--|----------------------|--------------------|
| <i>Island Bank</i>   | <i>G</i>             | <i>F</i>           |
| <i>Everybody's Credit Union</i>  | <i>C</i>             | <i>C</i>           |
| <input type="checkbox"/> Check here if entry is None <input type="checkbox"/> Check here if additional sheets are attached |                      |                    |

**ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS**

List every officership, directorship, trusteeship, or other fiduciary relationship held **during the disclosure period** (1/1/05 to date of filing) in any business or organization, the term of office, and the annual compensation.

| NAME AND ADDRESS OF BUSINESS   | TITLE HELD            | TERM OF OFFICE            | ANNUAL COMPENSATION |
|--|-----------------------|---------------------------|---------------------|
| <i>Good Works Charities<br/>0000 Nuuanu Lane<br/>Honolulu, HI 96800</i>  | <i>Director</i>       | <i>1998-(no end date)</i> | <i>None</i>         |
| <i>Manapua, Unlimited<br/>000 Gulick Avenue<br/>Honolulu, HI 96800</i>   | <i>Vice President</i> | <i>1990-2008</i>          | <i>None</i>         |
| <i>The Lani Smith Trust<br/>000 Wilder Street<br/>Honolulu, HI 96800</i>   | <i>Trustee</i>        | <i>1999-2010</i>          | <i>A</i>            |
| <input type="checkbox"/> Check here if entry is None <input type="checkbox"/> Check here if additional sheets are attached |                       |                           |                     |

**ITEM 6: INTERESTS IN REAL PROPERTY HELD, EXCLUDING PERSONAL RESIDENCE(S)**

List interests in real property in or outside of the State held **during the disclosure period** (1/1/05 to date of filing), if the interest has a value of \$10,000 or more. Real property that is your personal residence need not be listed.

| STREET ADDRESS  | TAX MAP KEY NUMBER<br>(IF TAX MAP KEY NUMBER EXISTS) | VALUE    |
|---|--|----------|
| <i>0000 Mango Lane<br/>Kailua, HI 96799</i>             | <i>9-0-0-00-00</i>                                   | <i>H</i> |
| <i>0000 Lark Avenue, Apt. 2<br/>Las Vegas, NV 22200</i> |  | <i>G</i> |

☐ Check here if entry is None ☐ Check here if additional sheets are attached

**ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED, EXCLUDING PERSONAL RESIDENCE(S)**

List interests in real property in or outside of the State acquired **during the disclosure period** (1/1/05 to date of filing), if the interest has a value of \$10,000 or more. Real property that is your personal residence need not be listed.

| STREET ADDRESS AND TAX MAP KEY NUMBER<br>(IF TAX MAP KEY NUMBER EXISTS) | AMOUNT AND NATURE OF<br>CONSIDERATION PAID | NAME OF PERSON<br>RECEIVING THE<br>CONSIDERATION |
|---|--|--|
| <i>0000 Pebble Lane<br/>San Jose, CA 11100</i>                          | <i>H, Cash</i>                             | <i>Sam and Sandy Seller</i>                      |

☐ Check here if entry is None ☐ Check here if additional sheets are attached

**ITEM 8: INTERESTS IN REAL PROPERTY TRANSFERRED, EXCLUDING PERSONAL RESIDENCE(S)**

List interests in real property in or outside of the State transferred **during the disclosure period** (1/1/05 to date of filing), if the interest has a value of \$10,000 or more. Real property that was your personal residence need not be listed.

| STREET ADDRESS AND TAX MAP KEY NUMBER<br>(IF TAX MAP KEY NUMBER EXISTS)                              | AMOUNT AND NATURE OF<br>CONSIDERATION RECEIVED | NAME OF PERSON<br>FURNISHING THE<br>CONSIDERATION |
|--|--|---|
| <i>0000 Kaheka Street, Unit 500<br/>Honolulu, HI 96800</i><br><br><i>Tax Map Key No. 9-1-0-00-01</i> | <i>F, Cash</i>                                 | <i>Robert Buyer</i>                               |

☐ Check here if entry is None ☐ Check here if additional sheets are attached



**ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES**

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period (1/1/05 to date of filing), excluding clients represented before courts.

| NAME OF CLIENT   | NAME OF STATE AGENCY                     |
|--|--|
| <i>Clifford Client</i>   | <i>Department of Business Regulation</i> |
| <input type="checkbox"/> Check here if entry is None <input type="checkbox"/> Check here if additional sheets are attached |  |

**ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES**

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period (1/1/05 to date of filing), if the interest has a value of \$5,000 or more.

| NAME AND ADDRESS OF BUSINESS   | NATURE OF BUSINESS     | NATURE OF INTEREST        | VALUE    |
|--|------------------------|---------------------------|----------|
| <i>Nolo Furniture, Inc.<br/>0000 Sand Island Road<br/>Honolulu, HI 96800</i>   | <i>Furniture Sales</i> | <i>Unsecured Creditor</i> | <i>A</i> |
| <input type="checkbox"/> Check here if entry is None <input type="checkbox"/> Check here if additional sheets are attached |                        |                           |          |

**CERTIFICATION:** I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

*John Quincy Public*

*08/05/2006*

SIGNATURE

DATE